PTC/SB/97 (08-00)
Approved for use through 10/31/2002 OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
and to a collection of information unless it contains a valid OMB control number.

Application Number: 09/451,254

Filing Date: 11/29/1999

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office

02/23/2005

Date

Laurie Morgan

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

- 1. Fee Transmittal
- Response To Office Action Of January 4, 2005

Total pages including cover page: 23

(703) 872-9306 MS1-306US

> Please notify us immediately (509-324-9256) if there is a problem with the quality of this fax.

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the Individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/17 (12-04) Approved for use through 07/31/2008, OMB 0851-0932 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Panerwork Reducti	on Act of 19	195 no nersons are ten.	uired to re	enand to a callectic	on of inforc	nation unle	s it dianlava a v	MIN OMR	control number
Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).  FEE TRANSMITTAL For FY 2005  Applicant claims small entity status. See 37 CFR 1.27				Complete if Known					
				Application Number 09/451,254			54		
				Filing Date		11/29/1999			
				First Named Im	ventor	Paul England			
				Examiner Nam	е	JOHN M WINTER			
				Art Unit	Unit 3621				
TOTAL AMOUNT OF PAYMENT (\$) 0.00				Attorney Docke	t No.	MS1 306US			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
12.0750 Los 9 Hayes DLL C									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Grange rectly industrial forth an advantage and the second sector, of the sector sector, of the second sector, of the second sector, of the sector									
under 37 CFR 1.16 and 1.17									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION						` `			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
		FEES		CH FEES	EXAM	IINATION			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee	Small (5) Fee	<u>Entity</u> ·(\$)	Fees P	ald (\$)
Utility	300	150	500	250	200				
Design	200	100	100	50	130		·		
Plant	200	100	300	150	160	_	_		
Reissue	300	150	500	250	600	•	_		
Provisional	200	100	0	0	0	• •	0 .		
2. EXCESS CLAIM FEE	5			ŭ	•		•		Small Entity
Fee Description Fee (\$) Fee (\$)									
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25  Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100									
Multiple dependent claims 360 180									
	tal Claims						<u>emisiD tne</u>		
- 20 or HP = HP = highest number of total d	eime neid f	x 50 =	•		Fee	<u>. (\$)</u>	Fee Paid	<u>(\$)</u>	
	xtra Clair		Fee Pa	ald (\$)				—	j
- 3 or HP = HP = highest number of indepe	ndent claim	x 200 =	:						
3. APPLICATION SIZE F		o paid idi, ii gicami liini							
If the specification and	drawings	exceed 100 sheets	of pape	er, the applicat	ion size	fee due i	s \$250 (\$12	5 for sm	nall entity)
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
<u>Total Sheets</u> - 100 =	Extra She			additional 50 o			<u>Fee (\$)</u>	<u>F99</u>	Pald (\$)
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)									
Other:									
	-/-								
SUBMITTED BY	<del>-        </del>		l p	agistration No.					
Signature	egistration No. ttomey/Agent)	45760		Telephone (5	09),324	-9256			
Name (Print/Type) Emmanue	al A. Rive	era					Date 2/2	4/25	

PLL

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commerce. P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE ŧ 2 3 4 Attorney's Docket No. ......MS1-306US 5 Title: System and Method for Flexible Micropayment of Low Value Electronic 6 Assets 7 **RESPONSE TO OFFICE ACTION OF JANUARY 4, 2005** To: Honorable Commissioner for Patents PO Box 1450 10 Alexandria, VA 22313-1450 11 From: Emmanuel A. Rivera (Tel. 509-324-9256; Fax 509-323-8979) 12 Lee & Hayes, PLLC 421 W. Riverside Avenue, Suite 500 13 Spokane, WA 99201 Customer No. 22801 14 15 Sir: 16 In response to the Office action of January 4, 2005, the following is 17 presented: 18 The listing of the claims begins on page 2 of this paper. 19 20 21 22 23 24 25